



Statement of Organization CANDIDATE COMMITTEE

*Please read instructions before completing this form.

Type of Statement					
<input type="checkbox"/> NEW This committee is registering with the Virginia State Board of Elections for the first time.	<input checked="" type="checkbox"/> AMENDED This committee is filing an amended Statement of Organization.				
	Date Changes Took Effect <u>2/6/2014</u>	SBE-issued Committee ID <u>CC-12-00649</u>			
Committee Information					
Committee Information	<u>Friends of Sean Holihan</u> Name of Candidate Campaign Committee				
	<u>521 E Alexandria Ave</u> Street Address/PO Box				
	<u>Alexandria</u> City	<u>VA</u> State	<u>22301</u> Zip Code		
	<u>Stholihan@gmail.com</u> Email Address				
	<u>N/A</u> Campaign Website				
	<div style="border: 2px solid black; padding: 5px; text-align: center;"> CITY OF ALEXANDRIA FEB 07 2014 VOTER REGISTRATION ELECTORAL BOARD </div>				
Candidate Information					
Candidate Information	<u>Mr.</u> Salutation	<u>Holihan</u> Last Name	<u>Sean</u> First Name	<u>Thomas</u> Middle Name	 Suffix
	<u>521 E Alexandria Ave</u> Residence Address				
	<u>Alexandria</u> City				
	<u>VA</u> State				
	<u>22301</u> Zip Code				
	<u>Stholihan@gmail.com</u> Email Address				
	<u>571-488-5742</u> Daytime Phone #				
<input checked="" type="checkbox"/> By checking this box, I certify that I am currently registered to vote at the address above.					
Election Information					
Election Information	<u>City Council</u> Office Sought				
	District (if one)				
	<u>Democrat</u> Political Party	Year of Election	<input type="checkbox"/> November <input type="checkbox"/> May <input type="checkbox"/> Special Type of Election		



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Treasurer Information				
Treasurer Information	Salutation	Last Name	First Name	Middle Name
	<div style="display: flex; justify-content: space-between; padding: 5px;"> Mr. Holihan Sean Thomas </div>			
	Residence Address			
	<div style="display: flex; justify-content: space-between; padding: 5px;"> 521 E. Alexandria Ave Apt # </div>			
	City		State	Zip Code
	<div style="display: flex; justify-content: space-between; padding: 5px;"> Alexandria VA </div>		<div style="display: flex; justify-content: space-between; padding: 5px;"> 22301 </div>	
County or City of Residence			Voter Identification #	
<div style="display: flex; justify-content: space-between; padding: 5px;"> Stholihan@gmail.com </div>			<div style="display: flex; justify-content: space-between; padding: 5px;"> 571-488-5742 </div>	
Email Address			Daytime Phone #	
<input type="checkbox"/> By checking this box, I certify that I am currently registered to vote at the address above.				
Campaign Depository				
Name of Primary Financial Institution			Name of Other Financial Institution (if applicable)	
<div style="display: flex; justify-content: space-between; padding: 5px;"> Burke + Herbert Bank </div>				
City		State	City	State
<div style="display: flex; justify-content: space-between; padding: 5px;"> Alexandria VA </div>				
Committee Activity				
Dates of Activity	Please provide the following dates. (If an action has not yet occurred for this committee, write "N/A")			
	Date first contribution accepted: _____			
	Date first expenditure made: _____			
	Date campaign depository designated: _____			
	Date filing fee paid for party nomination: _____			
	Date Statement of Qualification filed: _____			
	Date treasurer appointed: _____			

(continued on next page)



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Filing Method	
Filing Method	<p>Please indicate the method by which this committee will submit all required campaign finance reports:</p> <p><input type="checkbox"/> File electronically using SBE's Electronic Filing Application.</p> <p><input type="checkbox"/> File electronically using an SBE Approved Vendor (Please indicate Name of Vendor: _____)</p> <p><input checked="" type="checkbox"/> File paper reports.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%; text-align: center;"> <hr style="width: 80%; margin: 0 auto;"/> Signature </div> <div style="width: 45%; text-align: center;"> <p>2/6/14</p> <hr style="width: 80%; margin: 0 auto;"/> Date </div> </div>
Signatures	
Candidate's Signature	<p>I affirm that, to the best of my knowledge, all of the information on this form is complete and truthful. I understand that I am required to comply with the provisions of the Campaign Finance Disclosure Act (Title 24.2, Chapter 9.3 of the <i>Code of Virginia</i>). I also understand that my Treasurer and I must truthfully report, in a timely manner, all monies and things of value which this campaign committee receives or expends. Civil penalties shall be assessed for late or un-filed reports in the manner required by the <i>Code of Virginia</i>. I further understand that if I do not appoint a treasurer, or if at any time the treasurer's position is vacant, that I, as the candidate, will assume and accept all of the Treasurer's duties until the position is filled. I also understand that if I provide false information on this or any document submitted to the State Board of Elections or local electoral boards that I may be subject to the provisions of § 24.2-1016 which is punishable by a Class 5 felony.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%; text-align: center;"> <hr style="width: 80%; margin: 0 auto;"/> Candidate's Signature </div> <div style="width: 45%; text-align: center;"> <p>2/6/14</p> <hr style="width: 80%; margin: 0 auto;"/> Date </div> </div>
Treasurer's Signature	<p>I accept the appointment of Treasurer of this campaign committee. I understand that I am required to comply with the provisions of the Campaign Finance Disclosure Act (Title 24.2, Chapter 9.3 of the <i>Code of Virginia</i>). I understand that I must truthfully report all monies and things of value which this campaign committee receives or expends in a timely manner. Civil penalties will be assessed in the manner required by the <i>Code of Virginia</i> for late or non-filed reports. I also understand that if I provide false information on this or any document submitted to the State Board of Elections or local electoral boards that I may be subject to the provisions of § 24.2-1016 which is punishable by a Class 5 felony.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%; text-align: center;"> <hr style="width: 80%; margin: 0 auto;"/> Treasurer's Signature </div> <div style="width: 45%; text-align: center;"> <p>2/6/14</p> <hr style="width: 80%; margin: 0 auto;"/> Date </div> </div>